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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name Write the name that is on	Veronica First name	Cozing First name
your government-issued picture identification (for example, your driver's license or passport	Middle name White Last name	Middle name White Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx- 8356 OR 9 xx - xx-	xxx - xx- <u>9669</u> OR 9 xx - xx-

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Debtor 1 Veronica First Name		White Last Name	Case number (if known,)	
	About Debtor 1:		About Debtor	2 (Spouse Only	in a Joint Case):
4. Any business names and Employer	I have not used any business nar	nes or EINs.	✓ I have not us	ed any business nam	es or EINs.
Identification Numbers (EIN) you have used in the	Business name		Business name	е	
last 8 years	Business name		Business name	е	
Include trade names and doing business as names	EIN		EIN		
	EIN		EIN		
5. Where you live	3853 W. Cermak Rd. Apt 1		If Debtor 2 lives	s at a different addre	ess:
	Number Street		Number	Street	
	ChicagoIllinoisCityState	60623 Zip Code	Chicago City	Illinois State	60623 Zip Code
	Cook County		Cook County		
	If your mailing address is different fill it in here. Note that the court will so this mailing address.		If Debtor 2's mail		rent from yours, fill it y notices to this mailing
	Number Street		Number	Street	
	City State	Zip Code	City	State	Zip Code
6. Why you are choosing this	Check one:		Check one:		
district to file for bankruptcy	Over the last 180 days before filin lived in this district longer than in			t 180 days before filing district longer than in	
	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another	er reason. Explain. (S	ee 28 U.S.C. §§ 1408.)

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	onica	Martin Maria			Case number (if know	vn)
	Name the Court Abo	Middle Nam out Your Bankrı		Last Name		
7. The cha Bankru	pter of the ptcy Code choosing to	Check one. (For a b	brief description of	each, see <i>Notice Required</i> and check the appropriate bo		(b) for Individuals Filing for Bankruptcy (Form
8. How yo the fee	u will pay	court for mo may pay wit on your beh. I need to pa Individuals to By law, a jud less than 15 the fee in in	ore details about the cash, cashie alf, your attorn ay the fee in it to Pay Your Filinat my fee be weet dge may, but is 50% of the offic stallments). If	ut how you may pay. Ther's check, or money of the pay may pay with a creat metallments. If you chang Fee in Installments (waived (You may requise not required to, waived poverty line that approximate the proximate that approximate the proximate that approximate the proximate the proximate that approximate the proximate the proximate that the proximate the proxim	rypically, if you rder If your a dit card or checoose this option Official Form 10 est this option e your fee, and oplies to your fan, you must fill or the results.	only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay out the <i>Application to Have the</i>
bankru	ou filed for otcy within 8 years?	✓ No. ✓ Yes. District District District		When When	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
cases p being fi spouse filing th you, or	s partner, or	✓ No. Yes. Debtor District Debtor District		When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11. Do you residen	-	✓ No.	r landlord obtained Go to line 12.	an eviction judgment against atement About an Eviction Jud petition.		

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Debtor 1 Veronica		N 41-1-		White	Case number (if	known)	
Part 3: Report About An	y Bus		_{lle Name} es You Own as a S	Last Name Sole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		No. Yes.	Single Asset Re Stockbroker (as	Street Street Street Street Street Street Street Street	n 11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51I . § 101(53A))		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C.	dead opera	<i>llines.</i> If y	ou indicate that you are a ash-flow statement, and 6(1)(B). I am not filing under Ch	a small business del federal income tax n napter 11.	nether you are a small butor, you must attach you eturn or if any of these do	r most recent balanc ocuments do not exi	e sheet, statement of st, follow the procedure in 11
§ 101(51D).		Yes.		er 11 and I am a sm	all business debtor acco	rding to the definition	n in the Bankruptcy Code.
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any F	Property That Need	ds Immediate A	ttention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and			What is the hazard? If immediate attention is i	needed, why is it nee	eded?		
identifiable hazard to public health or safety? Or do you							
own any property that needs immediate attention?		· ·	Where is the property?	Number	Street		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	3	Zip Code

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Debtor 1 Veronica White Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit ✓ I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 Veronica		White Case number (if know	мn)
Part 6: Answer These Qu	Middle Name uestions for Reporting Purpor	Last Name	
16. What kind of debts do you have?	16a. Are your debts primaril 101(8) as "incurred by ar ☐ No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primaril obtain money for a busin investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17.	y consumer debts? Consumer debts in individual primarily for a personal, far y business debts? Business debts are ess or investment or through the ope	amily, or household purpose." are debts that you incurred to ration of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa No. Yes.	er 7. Go to line 18. Do you estimate that after any exempt property in able to distribute to unsecured creditors?	is excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below			
For you	and correct. If I have chosen to file under (11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I have I request relief in accordance I understand making a false st	Chapter 7, I am aware that I may produce States Code. I understand the relief abover 7. and I did not pay or agree to pay some verification of the control	eone who is not an attorney to help ired by 11 U.S.C. § 342(b). ates Code, specified in this petition. aining money or property by fraud in 00, or imprisonment for up to 20

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Debtor 1	Veronica		White	Case number	(if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe	r attorney, if represented re not ented by an y, you do not	eligibility to proceed u the relief available un to the debtor(s) the no	nder Chapter 7, 11, der each chapter fo tice required by 11	12, or 13 of title 11, L r which the person is U.S.C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
	file this page.	/s/ Alex Nohr Signature of Attorney	for Debtor	Date	11/8/2016 MM / DD / YYYY
		Alex Nohr Printed name			
		Semrad Law Firm Firm name			
		11101 S. Western Ave	enue		
		Chicago		Illinois	60643
		City		State	Zip Code
		Contact phone	3122543168	Email address	ANohr@SemradLaw.com
		Bar number		Sta	te

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Fill in this inforr	mation to identify your cas	e:		
Debtor 1	Veronica		White	
	First Name	Middle Name	Last Name	
Debtor 2	Cozing		White	
(Spouse, if filing	g) First Name	Middle Name	Last Name	•
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	i
Case number (If known)	_		(class)	-

Check if this is a
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$14,980.00
1c. Copy line 63, Total of all property on Schedule A/B	\$14,980.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$17,628.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,867.33
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$30,026.00
Your total liabilities	\$52,521.33
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,631.11
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,391.00

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Deb		Veronica		White	Case number (if known)	
		First Name	Middle Name	Last Name		
Par	t 4: A	nswer These Que	stions for Administra	ative and Statistical Red	cords	
6. A	Are you	ı filing for bankruptcy ı	under Chapters 7, 11, or 1	3?		
	☐ No	o. You have nothing to rep	port on this part of the form.	Check this box and submit this	form to the court with your other schedule	S.
	✓ Yes	S.				
7. V	Vhat ki	ind of debt do you ha	ve?			
	_			ner debts are those incurred by but lines 8-10 for statistical purp	an individual primarily for a personal, oses. 28 U.S.C. § 159.	
	_	ur debts are not prima s form to the court with ye	-	have nothing to report on this p	eart of the form. Check this box and submit	t
			r Current Monthly Incoment 122B Line 11; OR, Form	e: Copy your total current month 122C-1 Line 14.	nly income from Official	\$2,867.90
9.	Сору	the following special	categories of claims fron	n Part 4, line 6 of Schedule E	/F:	
	From	n Part 4 on Schedule E	/F, copy the following:		Total claim	
	9a. D	omestic support obligati	ons (Copy line 6a.)		\$0.00	
	9b. Ta	axes and certain other de	bts you owe the governmer	nt. (Copy line 6b.)	\$4,867.33	
	9c. Cl	laims for death or persor	nal injury while you were into	oxicated. (Copy line 6c.)	\$0.00	
	9d. St	tudent loans. (Copy line	6f.)		\$0.00	
				divorce that you did not report a	\$0.00	
	priorit	ty claims. (Copy line 6g.)		¢0.00	
	9f. De	ebts to pension or profit-	sharing plans, and other sir	nilar debts. (Copy line 6h.)	\$0.00	
	9a T	'otal Add lines 9a throug	nh Of		¢4 967 22	

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Fill in this info	rmation to identify your cas	e:		
Debtor 1	Veronica		White	
	First Name	Middle Name	Last Name	
Debtor 2	Cozing		White	
(Spouse, if fili	ng) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number	·			
(If known)				

Official Form 106A/B

Check if this is an amended filing

12/15

Schedule A/B: Property

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question

Part 1:	Describe Each Residence, Building	, Land, or Other Real Estate You Own o	r Have an Interest In
	, ,	in any residence, building, land, or similar propert	ty?
✓	No. Go to Part 2		
	Yes. Where is the property?		
1.1	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
	Number Street City State Zip Code	Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this i property identification number:	Check if this is community property (see instructions)
If you	own or have more than one, list here: Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the Current value of the
	Number Street City State Zip Code	Manufactured or mobile home Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Check if this is community property (see instructions)

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Debtor 1	Veronica First Name	Middle Name	White Last Name	Case number	(if known)	
1.3Stre	et address, if available, or ot		What is the property? Check all that app Single-family home Duplex or multi-unit building	ly.		d claims on Schedule D: ims Secured by Property.
Nur	nber Street	[[Condominium or cooperative Manufactured or mobile home Land		Current value of the entire property?	Current value of the portion you own?
City	State	Zip Code	Investment property Timeshare Other		Describe the nature of interest (such as fee sinth the entireties, or a life of the entireties).	mple, tenancy by
) [[[Who has an interest in the property? Condition Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check one.	Check if this is con (see instructions)	nmunity property
		ة tion you own for a	Other information you wish to add about or operty identification number: all of your entries from Part 1, including re.	g any entries	s for pages	
Do you o vyou own th	at someone else drives. If you ans, trucks, tractors, sport util o	equitable interest i u lease a vehicle, als	in any vehicles, whether they are regist so report it on Schedule G: Executory Contr ycles			
3.1	Model: Year:	Dodge Dart 2015	Who has an interest in the propert one. Debtor 1 only	y? Check		aims or exemptions. Put ed claims on Schedule D: hims Secured by Property.
	Approximate mileage: Other information:	55000	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and and □ Check if this is community propries to the debtors.		Current value of the entire property? \$11575.00	Current value of the portion you own? \$11575.00
3.2	Make Model: Year:	Cadillac Seville 2003	instructions) Who has an interest in the propert one. Debtor 1 only	y? Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	•
	Approximate mileage: Other information:	153000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and and		Current value of the entire property? \$2075.00	Current value of the portion you own? \$2075.00
			Check if this is community proprinstructions)	Jerty (See		

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ebtor 1		White Case number	er (if known)	
	First Name Middle Name	Last Name		
3.3		Who has an interest in the property? Check		laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year: Approximate mileage:	Debtor 1 only	Creditors vvno mave Cla	aims Secured by Property
	Approximate mileage.	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
3.4	Make	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. Put
	Model:	one.	the amount of any secure	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
4.1	Make Model:	Who has an interest in the property? Check one.		laims or exemptions. Put ed claims on <i>Schedule D</i> .
	Year:	Debtor 1 only		aims Secured by Property
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	Current value of the
		At least one of the debtors and another		portion you own?
		At least one of the debtors and another		portion you own?
				portion you own?
4.2		Check if this is community property (see instructions)		portion you own?
4.2	Make	Check if this is community property (see	Do not deduct secured o	<u> </u>
	Make Model:	Check if this is community property (see instructions)		laims or exemptions. Put
		Check if this is community property (see instructions) Who has an interest in the property? Check	the amount of any secure	laims or exemptions. Put
	Model:	Check if this is community property (see instructions) Who has an interest in the property? Check one.	the amount of any secure Creditors Who Have Cla	laims or exemptions. Put ed claims on <i>Schedule D:</i> nims Secured by Propert
	Model: Year:	Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	the amount of any secure	laims or exemptions. Put
	Model: Year: Approximate mileage:	Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Cla Current value of the	laims or exemptions. Put ed claims on Schedule Daims Secured by Propert
	Model: Year: Approximate mileage:	Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Cla Current value of the	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property Current value of the
5 Add	Model: Year: Approximate mileage: Other information:	Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any secure Creditors Who Have Ck Current value of the entire property?	laims or exemptions. Put ed claims on Schedule Daims Secured by Propert

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D	ebtor 1	Veronica		Vhite	Case number (if known)	
		First Name		ast Name		
			Your Personal and Household Items ave any legal or equitable interest in	any of the following	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
			s and furnishings Dliances, furniture, linens, china, kitchenware			
✓	Yes. D	escribe	Misc. Household Goods			\$300.00
	'. Elect i Examp No		s and radios; audio, video, stereo, and digital equi	pment; computers, printer	rs, scanners; music	1
✓	Yes. D	escribe	Misc. Electronics			\$325.00
	Examp	•	lue and figurines; paintings, prints, or other artwork; b oin, or baseball card collections; other collections,	•	t objects;	
Ľ		escribe				1
	ı). Equi _l	oment for sp	norts and hobbies notographic, exercise, and other hobby equipment ks; carpentry tools; musical instruments	; bicycles, pool tables, golf	f clubs, skis; canoes	
✓	No	anu kaya	rs, carpentry tools, musical instruments			
	Yes. D	escribe				
	No		fles, shotguns, ammunition, and related equipment	t]
			clothes, furs, leather coats, designer wear, shoes,	accessories		
느	No					1
⊻	Yes. L	escribe	Misc. Clothing			\$450.00
	2. Jewe Examp	•	jewelry, costume jewelry, engagement rings, wedd er	ing rings, heirloom jewelr	y, watches, gems,	
<u>_</u>		escribe	Misc. Costume Jewelry			\$200.00
	Examp No	-farm anima les: Dogs, ca Describe	Is ts, birds, horses			
4	4 Δην	other perso	nal and household items you did not already li	ist including any health	aids you did not list	
	No	otilei perso	nai and nousenoid items you did not affeady i	isi, including any nealth	i aius you uiu 110t iist	
		escribe				
			alue of all of your entries from Part 3, including number here		_	\$1275.00

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Deb	tor 1	Veronica		White	Case number (if known)	
		First Name	Middle Name	Last Name		
Part	4:	Describe Your F	inancial Assets			
Do	you	own or have a	ny legal or equitable int	erest in any of the f	ollowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash					
E	Examp ✓	oles: Money you have No	e in your wallet, in your home, in a	safe deposit box, and on hai	nd when you file your petition	
		Yes			Cash:	
17.	Exa		vings, or other financial accounts titutions. If you have multiple acco		res in credit unions, brokerage houses, on, list each.	
		No Yes		Institution name:		
			17.1. Checking account:	US Bank		\$25.00
			17.2. Checking account:	Bank of America		\$30.00
			17.3. Savings account:			
			17.4. Savings account:			
			17.5. Certificates of deposit:			
			17.6. Other financial account:			
			17.7. Other financial account:			_
			17.8. Other financial account:			
			17.9. Other financial account:			
18.			or publicly traded stocks expestment accounts with brokerag	e firms, money market acco	unts	
	✓	No	Ü	, ,		
		Yes	Institution or issuer name:			
						-
19.	Non	n-publicly traded st	ock and interests in incorpora	ted and unincorporated	businesses, including an interest in	-
	an L	LC, partnership, a				
		No	Name of entity		% of ownership:	
		Yes. Give specific information about			· 	
		them				

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Deb	tor 1	Veronica		White	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg	otiable instruments ir	orate bonds and other negotian clude personal checks, cashiers onto are those you cannot transfer the lasuer name:	checks, promissory notes, and	money orders.	
21.			accounts A, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other	er pension or profit-sharing plans	
		No	Type of account:	Institution name:		
	Ш	Yes. List each account	401(k) or similar plan:			
		separately.	Danaian alam			
			Pension plan: IRA:			
			Retirement account:	-		
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, public			
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Ann	nuities (A contract for	a periodic payment of money to y	ou, either for life or for a numbe	r of years)	
	✓	No Yes	Issuer name and description:			

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Debt	or 1 Veronica First Name	Mi	iddle Name	White Last Name	Case number (if known)	
24.	Interests in a		account in a qual		der a qualified state tuition program	
	✓ No ☐ Yes	Institution name and des	cription. Separately	file the records of any interest	ts.11 U.S.C. § 521(c):	
25.		able or future interests or your benefit	in property (othe	r than anything listed in line	e 1), and rights or powers	
	✓ No					7
	Yes. Desc	inde				
26.				ther intellectual property m royalties and licensing agree	ements	
	✓ No Yes. Desc	ribe				7
27	Licenses from	nchises, and other gene	oral intensibles			
27.	Examples: Buil			ve association holdings, liquor	licenses, professional licenses	
	✓ No Yes. Desc	ribe				
						_
		erty owed to you?				
Mor	ney or prope	erty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov					portion you own?
						portion you own? Do not deduct secured
	Tax refunds ov				Federal:	portion you own? Do not deduct secured
	Tax refunds ov No Yes. Give s about you a	wed to you specific information t them, including whether liready filed the returns			Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov No Yes. Give s about you a	wed to you specific information t them, including whether				portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds on No Yes. Give s about you a and th	wed to you specific information t them, including whether lready filed the returns he tax years		child support, maintenance, div	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past	wed to you specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony		child support, maintenance, div	State: Local: vorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past	wed to you specific information t them, including whether lready filed the returns he tax years		child support, maintenance, div	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past	wed to you specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony		child support, maintenance, div	State: Local: vorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past	wed to you specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony		child support, maintenance, div	State: Local: vorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past	wed to you specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony		child support, maintenance, div	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa	specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony specific information	y, spousal support, o	sability benefits, sick pay, vacat	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa	wed to you specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony specific information	y, spousal support, o	sability benefits, sick pay, vacat	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa	specific information t them, including whether lready filed the returns ne tax years t due or lump sum alimony specific information	y, spousal support, o	sability benefits, sick pay, vacat	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 Veronica	White	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; heal	th savings account (HSA); credit, ho	meowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from so If you are the beneficiary of a living trust, expect property because someone has died. V No Yes. Describe		r are currently entitled to receive	
33.	Claims against third parties, whether or not your Examples: Accidents, employment disputes, insurative No		demand for payment	
34.	Other contingent and unliquidated claims of to set off claims No Yes. Describe	every nature, including counterc	aims of the debtor and rights	
35.	Any financial assets you did not already list No Yes. Describe			
36.	Add the dollar value of all of your entries from for Part 4. Write that number here			\$55.00
Part	5: Describe Any Business-Related Pr	roperty You Own or Have a	n Interest In. List any real estate	in Part 1.
37.	Do you own or have any legal or equitable into	erest in any business-related prop	erty?	
	No. Go to Part 6. Yes. Go to line 38.		p C	current value of the ortion you own? to not deduct secured claims rexemptions
38.	Accounts receivable or commissions you alread	ady earned		
	Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software,	modems, printers, copiers, fax mach	ines, rugs, telephones, desks, chairs, electro	nic devices
	✓ No ☐ Yes. Describe			

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Deb	tor 1	Veronica	**************************************	White	Case number (if known)	
40.	Mac	First Name Chinery, fixtures, eq	Middle Name Bulipment, supplies vou u	Last Name use in business, and tools of y	vour trade	
		No		,	,	
	H	Yes. Describe				
	_					
41.	Inve	entory				
		No				
	Ħ	Yes. Describe				
42.	Inte	erests in partnersh	ips or joint ventures			
		Yes. Give specific		Name of entity:	% of ownership:	
		information about				
		them				
43. (Custo	omer lists, mailing	lists, or other compilati	ons		
	✓	No				
		Yes. Do your lists in	clude personally identifiab	le information (as defined in 11 L	J.S.C. § 101(41A))?	
		☐ No				
		Yes. Descr	ribe			
44.	Anv	/ business-related r	property you did not alre	adv list		
	_	No .	, ,	•		
	Ħ	Yes. Give specific				
		information				
				art 5, including any entries for		
ior P	ап э.	_				
Part	6:		Farm- and Commeron interest in farmland, list it		perty You Own or Have an Interes	it In.
46.	Do	you own or have a	nny legal or equitable into	erest in any farm- or commerc	cial fishing-related property?	
	V	No. Go to Part 7.				Current value of the
		Yes. Go to line 47.				portion you own? Do not deduct secured
						claims
47.	Far	m animals				or exemptions
			oultry, farm-raised fish			
	✓	No				
		Yes. Describe				

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Debt	or 1	Veronica First Name	Middle Nosse	White	Case number (if known)	
48.	Cro	pps-either growing o	Middle Name	Last Name		
40.	_		n naivesteu			
		No Van Dagariba				
	Ш	Yes. Describe				
	-					
49.	Far	m and fishing equip	ment, implements, machinery, fixt	ures, and tools of trade		
	✓	No				
		Yes. Describe				
	_	L				
50.	Far	m and fishing suppl	ies, chemicals, and feed			
	V	No				
		Yes. Describe				
51.	Anv	/ farm- and commer	 cial fishing-related property you did	d not already list		
	√	No		,		
	H	Yes. Describe				
	ш	Too. Boombo				
	-				Г	
			of your entries from Part 6, includi			
tor Pa	art 6.	. Write that number I	nere			
					D: I N	
Part			pperty You Own or Have an I		DIG NOT LIST Above	
55.			erty of any kind you did not alread , country club membership	y list?		
	✓	No				ı
	П	Yes. Give specific				
		information				
54. A	dd th	ne dollar value of all	of your entries from Part 7. Write t	hat number here	>	
Part	8:	List the Totals o	of Each Part of this Form			
55 F	Part 1	1: Total real estate li	ne 2		•	
00.1		rotarroaroctato, n				
56. p	art 2	2 total vehicles, line	5	\$13650.00		
57. P	art 3	: Total personal and	I household items, line 15	\$1275.00	_	
58. P	art 4	: Total financial asso	ets, line 36	\$55.00	_	
59. F	Part 5	5: Total business-re	lated property, line 45	\$33.00	_	
			shing-related property, line 52		_	
					_	
			rty not listed, line 54		_	
62. 1	otal	personal property.	Add lines 56 through 61	\$14980.00	_	+ \$14980.00
					Copy personal property total	
						\$14980.00
63 T	otal (of all property on So	chedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:								
Debtor 1	Veronica		White					
	First Name	Middle Name	Last Name	-				
Debtor 2	Cozing		White					
(Spouse, if filin	g) First Name	Middle Name	Last Name	-				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	-				
Case number (If known)			(5:00)	-				

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption					
	Brief description: Dodge Dart, 2015 Line from Schedule A/B: 03	\$11,575.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)					
	Brief description: Cadillac Seville, 2003 Line from Schedule A/B: 03	\$2,075.00	\$2,075.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)					
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covered No Yes	3 years after that for ca							

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White Debtor 1 Veronica Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$25.00 **✓** description: \$25.00 **US Bank** 100% of fair market value, up to any applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$30.00 **V** description: \$30.00 **Bank of America** 100% of fair market value, up to any Line from applicable statutory limit 17 Schedule A/B: Brief 735 ILCS 5/12-1001(a) \$450.00 **V** description: \$450.00 Misc. Clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$300.00 \checkmark description: \$300.00 Misc. Household Goods 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief \$325.00 description: \$325.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$200.00 description: \$200.00 Misc. Costume Jewelry 100% of fair market value, up to any Line from applicable statutory limit

Schedule A/B:

12

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Fill in	this inform	nation to identify your case	9:				
Debto	or 1	Veronica		White			
20210		First Name	Middle Name	Last Name			
Debto	or 2	Cozing		White			
(Spou	use, if filing	First Name	Middle Name	Last Name			
Unite	d States B	ankruptcy Court for the:	Northern	District of Illinois			
	number			(State)			
(If kno	own)					_	
Offi	icial F	Form 106D					Check if this is a amended filing
201	hadu	le D. Credit	ors Who Ha	ve Claims Secur	ed by Pro		J
							12/1
space	is needed	•		e are filing together, both are equal se entries, and attach it to this forn	•		
1. I	Do anv cre	editors have claims secu	red by your property?				
ï	_ `			our other schedules. You have nothing	else to report on this fo	orm.	
i		fill in all of the information	•				
			bolow.				
Part '	List	All Secured Claims					
2.			or has more than one secu	Column A	Column B	Column C	
	for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.				Amount of claim	Value of	Unsecured
	much as	possible, list the claims in	alpriabelical order accordi	ng to the creditor's name.	Do not deduct the	collateral	portion
					value of collateral.	that supports this claim	If any
2.1	SAFCO		Describe the property	that coourse the elaim.	\$17,628.00	\$11,575.00	\$6,053.00
	Creditor's	r's Name		that secures the claim:	ψ,σ20.00	Ψ,σ.σ.σσ	_+-,
	Number	andrews Ave # 5 er Street	072 Automobile As of the date you file.	the claim is: Check all that apply.			
			- Contingent				
	Fort		Unliquidated				
		ale Florida 33309	Disputed				
	City	State ZIP Code		II the est and the			
		es the debt? Check one.	Nature of lien. Check a	iii tnat appiy.			
		or 1 only or 2 only	An agreement you r car loan)	made (such as mortgage or secured			
	Debt	or 1 and Debtor 2 only	Statutory lien (such	as tax lien, mechanic's lien)			
	At least one of the debtors and another Check if this claim relates to a community debt Date debt was 11/1/2015		Judgment lien from	a lawsuit			
			Other (including a right to offset)				
			Last 4 digits of accou	4404			
	incurred						
		Add the dollar value of	vour entries in Column	A on this page. Write that	\$17,628,00		

number here:

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Fill in	this inforn	nation to identify your case	e:							
Debto	or 1	Veronica			White					
Dobic	<i>7</i> 1 1	First Name	Middle Nam	ne	Last Name					
Debto		Cozing			White					
(Spou	ise, if filing	i) First Name	Middle Nam	ne	Last Name					
United	d States B	ankruptcy Court for the:	Northern		District of Illinois					
Casa	number				(State)					
(If kno										
Offi	cial F	orm 106E/F						Che	ck if this is an	amended filin
Scl	hedu	ıle E/F: Cre	ditors Wh	no H	lave Uns	secured	Claims			12/1
106Å/E that ar entries known Part 1	B) and on re listed in s in the bon). List	ecutory contracts or une Schedule G: Executory in Schedule D: Creditors oxes on the left. Attach All of Your PRIORIT editors have priority un to to Part 2.	y Contracts and Unes S Who Hold Claims the Continuation Pa TY Unsecured CI	expired L Secured age to th aims	eases (Official Fo by Property. If m is page. On the to	orm 106G). Do n ore space is ne	ot include any cr eded, copy the P	editors with art you need	partiallý sec I, fill it out, n	ured claims umber the
ĺ	✓ Yes.									
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)						nounts. As the				
								Total claim	Priority amount	Nonpriority amount
2.1		Revenue Service		l act /	digits of account	number		\$4,867.33	\$4,867.33	\$0.00
		reditor's Name			J					
	P.O. Box	7346 Street		When	was the debt inc	urred?n	<u>/a</u>			
	Number	Street			he date you file, t	he claim is: Che	ck all that apply.			
					ontingent					
	Philadelp			Un	liquidated					
	City	State surred the debt? Check	Zip Code	Dis	sputed					
		tor 1 only	one.	Type of	f PRIORITY unse	cured claim:				
		tor 2 only			mestic support ob					
	H	,			• • • • • • • • • • • • • • • • • • • •	· ·				
	브	tor 1 and Debtor 2 only			xes and certain othe	,	3			
	L At lea	ast one of the debtors and	another		aims for death or pe oxicated	ersonal injury whi	e you were			
	Ched	ck if this claim relates to t	o a community		ner. Specify					
	Is the cla	aim subject to offset?								
	✓ No									
	Yes									

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Debto	or 1	Veronica White		
		First Name Middle Name Last N	lame	
Part 2	2:	List All of Your NONPRIORITY Unsecured Claims		
3.	Do :	any creditors have nonpriority unsecured claims against you?	?	
J. 1		No. You have nothing to report in this part. Submit this form to the c		
	H		South with your other scriedules.	
	✓	Yes.		
			order of the creditor who holds each claim. If a creditor has more the	
			aim listed, identify what type of claim it is. Do not list claims already inc	
		· · · · · · · · · · · · · · · · · · ·	in Part 3.If you have more than four priority unsecured claims fill out the	ne Continuation
	Pag	e of Part 2.		
				Total claim
4.1		NI, INC.	Last 4 digits of account number 5851	\$554.00
		npriority Creditor's Name D Box 3517		
	_	mber Street	When was the debt incurred? 6/1/2013	
			As of the date you file, the claim is: Check all that apply.	
		_	Contingent	
		pomington Illinois 61702	Unliquidated	
	Cit	y State Zip Code ho incurred the debt? Check one.		
		Deliteration 1.	Disputed	
	Ě	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	H	, and the second se	Student loans	
	L	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
		At least one of the debtors and another	that you did not report as priority claims	
		Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	ls	the claim subject to offset?	debts	
	~	l a c	001 Collection; Collecting for ORIGINAL CREDITOR: US	
	Ē	Yes	Other. Specify CELLULAR	
	-			
4.2		MER FST FIN	Last 4 digits of account number0001	\$250.00
		15 N. Ridge Rd, Suite 200	When was the debt incurred? 1/1/2016	
		mber Street		
			As of the date you file, the claim is: Check all that apply.	
	Wi	chita Kansas 67205	Contingent	
	Cit		Unliquidated	
	W	no incurred the debt? Check one.	Disputed	
	✓	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
		Debtor 2 only	Student loans	
		Debtor 1 and Debtor 2 only		
	F	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	H			
	Ŀ	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
		the claim subject to offset?	Other. Specify 12 InstallmentLoan	
	\leq	No		
	L	Yes		
4.3		MERICAN COLLECTIONS E	Last 4 digits of account number 3878	\$300.00
		npriority Creditor's Name 5 S WHITING ST STE 500		
		mber Street	When was the debt incurred? 12/1/2010	
			As of the date you file, the claim is: Check all that apply.	
		EVANDRIA Viscisia 00004	Contingent	
	Cit	EXANDRIA Virginia 22304 y State Zip Code	Unliquidated	
		ho incurred the debt? Check one.	Disputed	
	V	Debter 4 each		
	F	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	F	Debtor 1 and Debtor 2 only	Student loans	
	늗	'	Obligations arising out of a separation agreement or divorce	
		At least one of the debtors and another	that you did not report as priority claims	
		Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is	the claim subject to offset?	debts Out Collection: Collecting for	
	✓	No	001 Collection; Collecting for ORIGINAL CREDITOR:	
		Yes	Other. Specify MEDICAL PAYMENT DATA	

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Americash - Bankruptcy 4.4 \$0.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 184 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60016 Des Plaines Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Unsecured Is the claim subject to offset? **✓** No Yes ATG CREDIT \$439.00 Last 4 digits of account number 9609 Nonpriority Creditor's Name 1700 W CORTLAND ST STE When was the debt incurred? 11/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illino<u>is</u> 60622 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? $\overline{}$ 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA Yes Bank of America \$369.00 Last 4 digits of account number Nonpriority Creditor's Name POB 15026 When was the debt incurred? 9/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 19801 WILMINGTON Delaware Unliquidated Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Bank of America \$277.00 Last 4 digits of account number Nonpriority Creditor's Name POB 15026 When was the debt incurred? 3/1/2015 Street Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19801 Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify **✓** No Yes 4.8 CCI \$101.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 501 Greene Street # 302 11/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30901 Augusta Georgia Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Collection; Collecting for **V ✓** No **ORIGINAL CREDITOR: 10** COMMONWEALTH EDISON Yes Other. Specify **COMPANY CENTERPOINT ENERGY ENT** \$252.00 Last 4 digits of account number 1397 Nonpriority Creditor's Name PO BOX 1700 When was the debt incurred? 9/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent HOUSTON Texas 77251 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify __ 001 InstallmentLoan **✓** No

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 City of Chicago Department of Revenue \$6,000.00 Last 4 digits of account number Nonpriority Creditor's Name 121 North LaSalle Street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60602 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Unsecured Is the claim subject to offset? **✓** No Yes 4.11 **CREDITORS DISCOUNT & A** \$767.00 Last 4 digits of account number 6806 Nonpriority Creditor's Name 415 E MAIN ST When was the debt incurred? 11/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **STREATOR** Illinois 61364 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: **V ✓** No Other. Specify_ MEDICAL PAYMENT DATA Yes **DEPT OF ED/NAVIENT** 4.12 \$9,429.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? 6/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent 18773 Wilkes Barre Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify **V** No

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim DEPT OF ED/NAVIENT** 4.13 \$4,522.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 18773 Wilkes Barre Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes **DEPT OF ED/NAVIENT** 4.14 \$4,213.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 9635 6/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent 18773 Wilkes Barre Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.15 **DEPT OF ED/NAVIENT** \$2,676.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Wilkes Barre Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ **✓** No

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 **DEPT OF ED/NAVIENT** \$2,546.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Wilkes Barre Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes **DEPT OF ED/NAVIENT** 4.17 \$2,336.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 9635 6/1/2011 Street Number As of the date you file, the claim is: Check all that apply. Contingent 18773 Wilkes Barre Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **V** No Yes 4.18 **DEPT OF ED/NAVIENT** \$1,343.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Wilkes Barre Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ **✓** No

l Yes

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 **DEPT OF ED/NAVIENT** \$874.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Wilkes Barre Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes **ENHANCED RECOVERY CORPORATION** 4.20 \$256.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: AT T **✓** No Other. Specify Yes 4.21 **ENTERGY GSU** \$209.00 Last 4 digits of account number 2647 Nonpriority Creditor's Name PO BOX 6008 When was the debt incurred? 7/1/2010 Number As of the date you file, the claim is: Check all that apply. Contingent **NEW ORLEANS** Louisiana 70174 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify _ 001 InstallmentLoan **✓** No

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.22 **GATEWYFINSOL** \$8,623.00 Last 4 digits of account number _ Nonpriority Creditor's Name 221 North La Salle Street # 1000 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60601 Unliquidated State City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify 1 Automobile **✓** No Yes 4.23 I C SYSTEM INC \$255.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 64378 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL Minnesota 55164 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No Other. Specify ORIGINAL CREDITOR: ATT Yes 4.24 M3 Financial Services \$26.00 Last 4 digits of account number 2394 Nonpriority Creditor's Name 10330 Roosevelt Rd #200 When was the debt incurred? 3/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent Westchester Illinois 60154 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? **✓** 001 Collection; Collecting for

✓ No

Yes

Other. Specify

ORIGINAL CREDITOR:

MEDICAL PAYMENT DATA

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.25 \$617.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1550 N NÓRTWEST HWY STE 403 When was the debt incurred? 11/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE Illinois 60068 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA Yes 4.26 MBB \$386.00 Last 4 digits of account number Nonpriority Creditor's Name 1550 N NÓRTWEST HWY STE 403 When was the debt incurred? 3/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE Illinois 60068 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓ ✓** No ORIGINAL CREDITOR: Other. Specify ___ MEDICAL PAYMENT DATA Yes 4.27 MERCHANTS CREDIT GUIDE \$176.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? 10/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: **V ✓** No

Yes

Other. Specify _

MEDICAL PAYMENT DATA

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.28 \$700.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1410 INDÚSTRIAL PARK RD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 38242 **PARIS** Tennessee Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA Yes NORTHWEST COLLECTORS 4.29 \$133.00 Last 4 digits of account number Nonpriority Creditor's Name 3601 ALGONQUIN RD STE 23 When was the debt incurred? 11/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ROLLING** Illinois 60008 Unliquidated **MEADOWS** State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: **✓** No Other. Specify MEDICAL PAYMENT DATA Yes 4.30 Santander Consumer USA \$8,736.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 961245 When was the debt incurred? 10/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent 76161 Fort Worth Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify 073 Automobile **✓** No

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Veronica White Debtor 1 Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 **SNCHNFIN** \$200.00 Last 4 digits of account number __ Nonpriority Creditor's Name 1900 Hassell Rd When was the debt incurred? 10/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent 60169 Hoffman Est Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR: 04 CITY Other. Specify OF BERWYN Yes **SNCHNFIN** 4.32 \$200.00 Last 4 digits of account number DYE2 Nonpriority Creditor's Name 1900 Hassell Rd When was the debt incurred? 4/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent Hoffman Est 60169 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Collection; Collecting for **|**| **✓** No ORIGINAL CREDITOR: 04 CITY Other. Specify OF BERWYN Yes 4.33 **SNCHNFIN** \$200.00 Last 4 digits of account number _ TPDT Nonpriority Creditor's Name 1900 Hassell Rd When was the debt incurred? 4/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Hoffman Est Illinois 60169 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **V** Collection; Collecting for **✓** No ORIGINAL CREDITOR: 04 CITY

Yes

Other. Specify

OF BERWYN

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Debtor 1	Veronica			White	Case number (if known)				
	First Name	Mi	iddle Name	Last Name	<u> </u>				
Part 3:	art 3: List Others to Be Notified About a Debt That You Already Listed								
coll age	Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.								
	Arnold Scott Harris			On which entry in P	art 1 or Part 2 did you list the original creditor?				
Nar	Name			On which entry in i	— Contact and you list the original orealtor:				
<u>111</u>	111 W. Jackson # 600			Line 4.10 c	f (Check Part 1: Creditors with Priority Unsecured Claims				
Nui	mber Street			(Part 2: Creditors with Nonpriority Unsecured Claims				
Ch	icago	Illinois	60604	Last 4 digits of account number					
City	y	State	Zip Code						

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White Veronica Debtor 1 Case number (if known) First Name Middle Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$4,867.33 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$4,867.33 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$27,939.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$30,026.00

\$57,965.00

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:						
Debtor 1	Veronica		White			
	First Name	Middle Name	Last Name			
Debtor 2	Cozing		White			
(Spouse, if filing	^{ng)} First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)			(State)			

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inform	nation to identify your cas	e:			
Debtor 1	Veronica		White		
200101 1	First Name	Middle Name	Last Name		
Debtor 2	Cozing		White		
(Spouse, if filing		Middle Name	Last Name		
United States B	Sankruptcy Court for the:	Northern	District of Illinois	i	
		-	(State)	
Case number (If known)	_				
(II KIIOWII)					Check if this is a
					amended filing
Official I	Form 106H				
<u>Schedul</u>	e H: Your Co	odebtors			12/1
entries in the b Answer every q	oxes on the left. Attach uestion.		is page. On the top	o of any Addi	ded, copy the Additional Page, fill it out, and number the itional Pages, write your name and case number (if known).
Idaho, Loui	siana, Nevada, New Mexi 3o to line 3.	lived in a community prop co, Puerto Rico, Texas, Was couse, or legal equivalent liv	shington, and Wisco	nsin.)	unity property states and territories include Arizona, California,
	No	ouse, or legal equivalent liv	e with you at the tim	G:	
	Yes. In which community s	state or territory did you live?		Fill in the r	name and current address of that person.
	Name of your spouse, for	ormer spouse, or legal equiv	alent		
	Number Street				
	City	State	Z	ip Code	

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

Ca	ase 16-35707	Doc 1	iled 11/08 Documen		ntered 1 ge 39 of		18:36:15	Desc Ma	in
Fill in this inform	ation to identify	vour case:							
Debtor 1 Vero	onica : Name	Middle Na		White Last Name					
Debtor 2 Coz (Spouse, if filing) First		Middle Na		White Last Name			Check if this is: An amended	filing	
United States Bankru	ptcy Court for the:	Northern	Distric	ct of Illinois (State)				nt showing post- of the following	petition chapter 13 date:
Case number (If known)							MM / DD / Y	YYY	
Official For	m 106l								
Schedule I		ome							12/15
	oe Employmen			own). An	swer ever	y question	Debtor 2		
informati		Employment statu	us 🔽	Employed			Employed		
job,	e more than one			Not Employe	d		✓ Not Employ	yed	
	about additional	Occupation	Oak	brook Care (Contor				
Include pa or self-emplo	ırt time, seasonal,	Employer's name	ss <u>2013</u>	3 Midwest R			Number Street		
Occupatio student	n may include						 		
or nomem	aker, if it applies.		Oak City	Brook	Illinois State	60523 Zip Code	City	State	Zip Code
		How long employe	ed —						

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll

- deductions.) If not paid monthly, calculate what the monthly wage would be.

 3. Estimate and list monthly overtime pay.
- 4. Calculate gross income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse
2. \$2,335.15 \$0.00

3. + \$0.00 4. \$2,335.15 + \$0.00 \$0.00

Official Form 106I Schedule I: Your Income page 1

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Depto	r 1 Veronica	White	Case number (if known)		
	First Name Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse		
Co	py line 4 here	→ 4.	\$2,335.15	\$0.00		
5. List	all payroll deductions:					
5a.	Tax, Medicare, and Social Security deductions	5a	\$281.28	\$0.00		
5b.	Mandatory contributions for retirement plans	5b	\$0.00	\$0.00		
5c.	Voluntary contributions for retirement plans	5c	\$0.00	\$0.00		
5d.	Required repayments of retirement fund loans	5d	\$0.00	\$0.00		
5e.	Insurance	5e	\$0.00	\$0.00		
5f.	Domestic support obligations	5f	\$0.00	\$0.00		
5g.	. Union dues	5g	\$0.00	\$0.00		
5h.	Other deductions. Specify:	5h. + _	\$0.00 +	\$0.00		
6. Add +5h.	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +	5f + 5g 6	\$281.28	\$0.00		
7. Cal	culate total monthly take-home pay. Subtract line 6 from line	e 4. 7. <u> </u>	\$2,053.87	\$0.00		
	all other income regularly received:					
8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gr	066				
	receipts, ordinary and necessary business expenses, and the tronthly net income.		\$0.00	\$0.00		
8b.	Interest and dividends	8b	\$0.00	\$0.00		
8c.	Family support payments that you, a non-filing spouse, dependent regularly receive	or a				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	\$0.00	\$0.00		
	Unemployment compensation	8d	\$0.00	\$0.00		
	Social Security	8e	\$0.00	\$0.00		
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cas assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies	er				
	Specify:		\$0.00	\$0.00		
·	Pension or retirement income	8g	\$0.00	\$0.00		
	Other monthly income. Specify:		\$0.00 +			
9. Add	d all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9	\$0.00	\$0.00		
	Iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s	pouse	\$2,053.87 +	\$0.00	=	\$2,053.87
Inc rela	ate all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of your atives. In not include any amounts already included in lines 2-10 or amounts	household, your depen	.,	•		
Sp	ecify:				11. +	\$0.00
	Id the amount in the last column of line 10 to the amount it that amount on the Summary of Schedules and Statistical Su				12.	\$2,631.11
	,	,			L	Combined monthly income
13. D c	you expect an increase or decrease within the year after y	you file this form?				
L	Yes. Explain:					

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Debtor 1	Veronica		White	Cas	se number (if known)		
	First Name	Middle Name	Last Name				
Part 1:	Describe Employmer	nt					
		Debtor 1			Debtor 2		
Employ	ment status	✓ Employed			Employed		
		Not Employed			Not Employed		
Occupa	ation						
Employ	er's name	Pershing Gardens He	ealthcare Center L	LC			
Employ	er's address	3900 South Park Aver	nue				
		Number Street			Number Street		
		Berwyn	Illinois	60402			
		City	State	Zip Code	City	State	Zip Code
How lo	ng employed there?	1 year	_			_	

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Debtor 1 Veronica White Case number (if known)
First Name Middle Name Last Name

Part 2: Give Details About Monthly Income

For Debtor 1 For Debtor 2 or non-filing spouse

8h.Other monthly income. Specify:

1. Pershing Gardens Healthcare Center LLC \$577.24 \$0.00

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Fill in this infor	mation to identify yo	ur case:				
Debtor 1	Veronica		White			
Debior 1	First Name	Middle Name	Last Name			
Debtor 2	Cozing		White	Check if this is:		
(Spouse, if filin		Middle Name	Last Name	An amended filing	~	
United States I	Bankruptcy Court for	the: Northern	District of Illinois	A supplement sho	owing post-petitic	
Case number			(State)	expenses as of th	e following date:	
(If known)				MM / DD / YYYY	,	
Official	Form 106	<u>J</u>				
Schedu	le J: Your	Expenses				12/15
information. If		possible. If two married people are ded, attach another sheet to this f n.				umber
Part 1: Des	cribe Your Hou	ısehold				
1. Is this a joi						
No. Go	o to line 2					
Yes. D	oes Debtor 2 live i	n a separate household?				
[No					
	Yes. Debtor 2 m	ust file Official Forms 106J-2, Expens	ses for Separate Household of Debto	r 2.		
2. Do you hav		√ No				
Do not list D Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depend with you?	dent live
	penses include of people other	✓ No				
than yourself an	d vour	Yes				
dependent						
		oing Monthly Expenses				
	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup		•	-	
		non-cash government assistance ided it on Schedule I: Your Income			Yo	ur expenses
	or home ownershi	ip expenses for your residence. Inc	clude first mortgage payments and		4	\$500.00
	luded in line 4:				4.	
	state taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or	renter's insurance			4b.	\$0.00
4c. Home	maintenance, repair,	and upkeep expenses			4c.	\$0.00
4d. Home	owner's association	or condominium dues			4d.	\$0.00

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White Debtor 1 Veronica Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$300.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$350.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$95.00 10. Personal care products and services 10. \$90.00 11. Medical and dental expenses \$130.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$334.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$107.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$485.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Veronica		White	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calc u	ılate your monthly exp	enses.				\$2,391.00
22a. <i>A</i>	Add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly exp	penses for Debtor 2), if any, fro	m Official Form 106J-2			\$2,391.00
22c. A	add line 22a and 22b. The	e result is your monthly expens	ses.		22.	
23.Calcu	late your monthly net	income.				
23a. C	Copy line 12 (your combin	ned monthly income) from Sch	edule I.		23a	\$2,631.11
23b. C	Copy your monthly expens	ses from line 22 above.			23b	\$2,391.00
	, , ,	penses from your monthly incom	me.			\$240.11
	The result is your monthl	y net income.			23c	
24. Do yo	ou expect an increase	or decrease in your expens	es within the year after you	ı file this form?		
		o finish paying for your car loar se or decrease because of a n				
1	No					
	/es					
	Explain here:					

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Fill in this inform	nation to identify your	case:				
Debtor 1	Veronica		White			
	First Name	Middle Name	Last Name			
Debtor 2	Cozing		White	Check if this is:		
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filing		
United States Ba	ankruptcy Court for th	he: Northern	District of Illinois (State)		wing post-petition chapte	r 13
Case number			(Giaic)	expenses as or the	Fioliowing date.	
(If known)			_	MM / DD / YYYY		
Official F	Form 106เ	<u>J-2</u>				
Schedul	e J-2: Exp	enses for Separ	ate Household of	Debtor 2		12/15
one or more de expenses for De this form. On th	pendents in commebtor 2 that are not	on, list the dependents on both reported on Schedule J. Be as onal pages, write your name and	F Debtor 1 and Debtor 2 maintain a Schedule J and this form. Answe complete and accurate as possibled d case number (if known). Answer	er the questions on this e. If more space is nee	s form only with respec	ct to
1.Do you and I	Debtor 1 maintain s	separate households?				
No. Do n	ot complete this forn	n.				
✓ Yes.						
2. Do you have dependents?	• •	No				
Do not list De all other depe Debtor 2 rega whether listed dependent of Schedule J.	ardless of d as a	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2	Dependent's age	Does dependent live with you?	
Only list depe	endents					
Do not state t names.	he dependents'					
3. Do your exp	enses include people other	N o				
than yourse	if and your	Yes				
Part 2: Estin	nate Your Ongo	ing Monthly Expenses				
_	expenses as of you a date after the bar		ou are using this form as a supple	ement in a Chapter 13 o	ase to report	
	•	n-cash government assistance ed it on Schedule I: Your Income			Your expense	es
	r home ownership of the ground or lot. 4.	expenses for your residence. Ind	clude first mortgage payments and		4.	\$0.00
If not includ	ded in line 4:				•	
4a. Real esta					40	\$0.00
		intar's insurance			4a	
нь. гюрепу,	, homeowner's, or re	INGI S INSUIANCE			4b.	\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4c.

4d.

\$0.00

\$0.00

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Debtor 1 Veronica First Name	Middle Name	White Last Name	Case number (if known)		
					Your expenses
5. Additional mortgage paymer	nts for your residence, such	as home equity loans		5.	\$0.00
6. Utilities:					
6a. Electricity, heat, natural ga	S			6a.	\$0.00
6b. Water, sewer, garbage co	lection			6b.	\$0.00
6c. Telephone, cell phone, Inte	ernet, satellite, and cable servi	ces		6c.	\$0.00
6d. Other. Specify:				6d	\$0.00
7. Food and housekeeping sup	pplies			7.	\$0.00
8. Childcare and children's edu	ıcation costs			8.	\$0.00
9. Clothing, laundry, and dry cl	eaning			9.	\$0.00
10. Personal care products and	l services			10.	\$0.00
11. Medical and dental expense	es			11.	\$0.00
12. Transportation. Include gas	, maintenance, bus or train fai	re.			\$0.00
Do not include car payments	-tion novemenos moses	nee and beaks		12.	***
13. Entertainment, clubs, recre 14. Charitable contributions as		nes, and books		13.	\$0.00
	nd religious donations			14.	\$0.00
15. Insurance. Do not include insurance dedu	cted from your pay or include	d in lines 4 or 20.			
15a. Life insurance				15a	\$0.00
15b. Health insurance				15b	\$0.00
15c. Vehicle insurance				15c	\$0.00
15d. Other insurance. Specify:				15d	\$0.00
16. Taxes. Do not include taxes de	educted from your pay or inclu	ided in lines 4 or 20.			
Specify:				16.	\$0.00
17. Installment or lease paymer	nts:			10.	
17a. Car payments for Vehicle	1			17a	\$0.00
17b. Car payments for Vehicle	2			17b	\$0.00
17c. Other. Specify:				17c	\$0.00
17d. Other. Specify:				17d	\$0.00
18. Your payments of alimony,			deducted from		\$0.00
your pay on line 5, Schedu				18.	
19.Other payments you make t	• •	-			
				19.	\$0.00
20. Other real property expense 20a. Mortgages on other prop		o of this form or on Sche	aule 1: Your Income.	00-	\$0.00
20b. Real estate taxes 20b.	o.r.			20a	\$0.00
20c. Property, homeowner's, o	or renter's insurance			20b	\$0.00
20d. Maintenance, repair, and				20c	\$0.00 \$0.00
20e. Homeowner's association				20d	\$0.00
200. I IOITICOWITEI 3 A330CIALIOI	i oi oonaoniiiliam aacs			20e	\$0.00

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Debtor 1 Veror		Middle Name	White Last Name	Case number (if known)		
21.Specify:	ame	Middle Name	Lastivalle		21	\$0.00
The result is	the monthly expenses of D es for Debtor 1 and Debtor 3	ebtor 2. Copy the res	ult to line 22b of Schedule	e J to calculate the	22.	\$0.00
23.Line not use	d on this form.					
24. Do you exp	ect an increase or decrea	se in your expense	s within the year after y	ou file this form?		
	e, do you expect to finish pa ayment to increase or decr					
✓ No						
Yes						
	Explain here:					

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Fill in this information to identify your case:						
Debtor 1	Veronica		White			
	First Name	Middle Name	Last Name			
Debtor 2	Cozing		White			
(Spouse, if filin	g) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
Case number (If known)			(State)			

Official Form 106Dec

Check if this is an
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and						
×	·	✗ /s/ Cozing White						
^	7-57-57-57-57-57-57-57-57-57-57-57-57-57	, as a country of the						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 11/8/2016	Date 11/8/2016						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill in this information to identify your case:						
Debtor 1	Veronica		White			
	First Name	Middle Name	Last Name			
Debtor 2	Cozing		White			
(Spouse, if filing) First Name		Middle Name	Last Name			
United States B	ankruptcy Court for the:	Northern	District of Illinois(State)			
Case number (If known)			(Giale)			

Official Form 107

Check if this is an amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	art 1: Give Details About Your Marital Status and Where You Lived Before									
1.	Wh	at is your curre	nt marital st	atus?						
	✓	Married Not married								
2.	Dui	ring the last 3 ye	ars, have yo	ou lived anywhere	other than where you live	now?				
	✓	No Yes. List all of th	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1: Number Street			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there		
				Same as Debtor 1		Same as Debtor 1				
				From	Number Street			From		
					То				То	
		City	State	Zip Code		City	State	Zip Code		
						Same as Debtor 1			Same as Debtor 1	
		Number Street			From	Number Stree	t		From	
					To	-			То	
		City	State	Zip Code		City	State	Zip Code		
	territo	ories include Ariza No	ona, California	a, Idaho, Louisiana,	ouse or legal equivalent in Nevada, New Mexico, Puer btors (Official Form 106H).				mmunity property states and	
		ŕ			,					

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Deb	tor 1			White		e nur	mber (if known)	
	_	First Name Middle		Last Name				
Part		Explain the Sources of Your I						
	4. Did you have any income from employment or from operate Fill in the total amount of income you received from all jobs and activities. If you are filing a joint case and you have income that y No Yes. Fill in the details.				ses, including part-time			ears?
			Debtor 1				Debtor 2	
			Sources of income Check all that apply.		Gross income (before deductions and exclusions)		Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips ☐ Operating a business		\$21000.00		Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2015) YYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business		\$19000.00		Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2014) YYYY	✓ Wages, commissions, bonuses, tips Operating a business		\$12000.00		Wages, commissions, bonuses, tips Operating a business	
! (nclui cene case	you receive any other income during to de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received to each source and the gross income from the No Yes. Fill in the details.	ome is taxable. Exam terest; dividends; mon ogether, list it only onc	ples of of ney collect te under l	ther income are alimony; cted from lawsuits; royalti Debtor 1.	ies; a	and gambling and lottery wini	
•			Debtor 1				Debtor 2	
			Sources of incom Describe below.	ie	Gross income from each source (before deductions an exclusions)		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until he date you filed for bankruptcy:				-		
		For last calendar year: January 1 to December 31, 2015) YYYY				-		
		For the calendar year before that: January 1 to December 31, 2014 YYYYY				-		

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Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as 'incurred by an individual primarily for a personal, family, or household purpose.' During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6.425' or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6.425' or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and allimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? Yes. List below each creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for	ebtor 1		ronica t Name		Middle Name	White Last Name	Case number	er (if known)	
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Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?			to	otal amount y	ou paid that credit	or. Do not include payment	s for domestic support obliga	ations, such as	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7.			* Subject to	adjustment o	n 4/01/19 and eve	ry 3 years after that for case	es filed on or after the date of	adjustment.	
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Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment			During the 9	0 days before	e you filed for bank	kruptcy, did you pay any cre	ditor a total of \$600 or more?		
that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment			✓ No. Go	to line 7.					
Creditor's Name Mortgage Car Credit card Loan repayment Suppliers or vendors Credit card Cother Credit card Cother Credit card Cother Car Credit card Car Cother Car Car Cother Car Car Car Car Car Car Car Credit card Can repayment Suppliers or vendors Cother Credit card Con repayment Cother Credit card Car Credit card Car Credit card Car Credit card Car Car Car Credit card Car			th	at creditor. D	o not include pay	ments for domestic suppor	t obligations, such as child s		
Number Street City State Zip Code Credit card Loan repayment Suppliers or vendors Other Creditor's Name Number Street City State Zip Code Credit card Loan repayment Suppliers or vendors Credit card Loan repayment Suppliers or vendors Credit card Loan repayment Suppliers or vendors Other Creditor's Name City State Zip Code Mortgage Car Number Street Credit card Loan repayment Suppliers or vendors Credit card Loan repayment Suppliers or vendors Other						Dates of payment	Total amount paid	Amount you still owe	
Number Street City State Zip Code Creditor's Name City State Zip Code Mortgage Car Number Street City State Zip Code Creditor's Name Creditor's Name Creditor's Name Creditor's Name Creditor's Name Suppliers or vendors Creditor's Name Creditor's Name Suppliers or vendors Car Creditor's Name Suppliers or vendors Creditor's Name Suppliers or vendors		Cre	ditor's Name	1					
City State Zip Code vendors Other Creditor's Name Mortgage		Num	nber Street						Credit card
Creditor's Name Mortgage Car Credit card Loan repayment Suppliers or vendors Other Creditor's Name Mortgage Car Creditor's Name Creditor's Name Car		City		State	Zip Code				vendors
Number Street Car	-								
City State Zip Code Creditor's Name Creditor's Name Mortgage Car Number Street City State Zip Code Suppliers or vendors Car Car Suppliers or vendors Car Credit card Loan repayment Suppliers or vendors		Cre	ditor's Name						
City State Zip Code Suppliers or vendors Other Creditor's Name Mortgage Car Number Street Credit card Loan repayment Suppliers or vendors Suppliers or vendors		Nun	nber Street						=
City State Zip Code vendors Other Creditor's Name Mortgage Car Number Street City State Zip Code State Zip Code Vendors Vendors Suppliers or vendors									
Creditor's Name Mortgage Car Credit card Loan repayment Suppliers or vendors		City		State	Zip Code				vendors
Number Street Car		Cree	ditor's Name						
City State Zip Code Loan repayment Suppliers or vendors									Car
City State Zip Code Suppliers or vendors		Nun	nber Street						
City State Zip Code vendors									
		City		State	Zip Code				

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ebtor 1	Veronica First Name	Middle Name		hite st Name	Case number ((if known)
1400						the come are invalidant.
Insid corpo agen	orations of which you are	any general partners an officer, director, pe ness you operate as a	; relatives of any rson in control, or	general partners; par r owner of 20% or mo	tnerships of which y ore of their voting se	ho was an insider? you are a general partner; curities; and any managing pmestic support obligations,
	No Yes. List all payments to a	an insider				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
İ	Number Street					
-	City State	Zip Code				
	Insider's Name					
İ	Number Street					
	City State	Zip Code				
insid Includ				/ payments or trans	fer any property o	on account of a debt that benefited an
	Yes. List all payments that	benefited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
ļ	Insider's Name			-		
İ	Number Street					
-	City State	Zip Code				
	Insider's Name					
i	Number Street					

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otor 1	Veronica		White	(Case number <i>(if</i>	known)	
	First Name	Middle Name	Last Name				
4:	Identify Legal Action	ns, Repossession	s, and Foreclosure	es			
ist a	nin 1 year before you filed all such matters, including pract disputes.						ing? or custody modifications, and
	No Yes. Fill in the details.						
		Nat	ure of the case	Court or	agency		Status of the case
	Case title						Pending
	Case number			Court Nar	ne		On appeal
				NumberSt	reet		Concluded
				City	State	Zip Code	
	Case title						Pending
	Cooper margh and			Court Nar	ne	_	On appeal
	Case number			NumberSt	reet		Concluded
				City	State	Zip Code	
Ш	Yes. Fill in the information	n below.	Describe the prop	perty		Date	Value of the
							property
	Creditor's Name		Explain what happ	nonad			
	Number Street		- Explain what hap	perieu			
			Property was re	epossessed.			
			Property was for Property was g				
	City State	e Zip Code	. =	garriisried. ittached, seized	, or levied.		
			Describe the prop	perty		Date	Value of the property
	Creditor's Name		-				
	Stocker o Marie		Explain what happ	pened			
	Number Street						
			Property was re				
			Property was g				
	City State	e Zip Code	Property was a	ttached, seized	or levied.		

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Deb	tor 1	Veronica	AC 1 11 A	White	Case number (if known)		
		First Name	Middle Name	Last Name			
11.			led for bankruptcy, did an a payment because you o		ank or financial institution, s	et off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street	_				
				Last 4 digits of account no	umber: XXXX-		
		City State	Zip Code				
12.		hin 1 year before you file ointed receiver, a custod		of your property in the p	oossession of an assignee fo	or the benefit of	creditors, a court-
	✓	No					
	Ш	Yes					
Part	5:	List Certain Gifts ar	nd Contributions				
13.	Wi	thin 2 years before you f	iled for bankruptcy, did yo	ou give any gifts with a to	otal value of more than \$600	per person?	
	✓	No					
		Yes. Fill in the details for	each gift.				
		Gifts with a total value per person	of more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gav	e the Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to ye	ou				
		Person to Whom You Gav	re the Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to ye	ou				

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Deb	tor 1	Veronica First Name	Mic	ddle Name	White Last Name	Case number (if known)	-	
14.	Wit	hin 2 years before yo No	ou filed for ba	nkruptcy, did yo	u give any gifts or contributions	s with a total value of	more than \$600 t	o any charity?
	Ħ	Yes. Fill in the details	for each gift o	r contribution.				
		Gifts or contributio that total more than	ns to chariti		Describe what you contribute	d	Date you contributed	Value
		Charity's Name						
		Number Street						
		City S	State	Zip Code				
Part	6:	List Certain Loss	ses					
15.		No Yes. Fill in the details. Describe the proper how the loss occurrence.	rty you lost a		Describe any insurance cover Include the amount that insurance pending insurance claims on line A/B: Property.	rage for the loss e has paid. List	Date of your loss	Value of property lost
					7.12.1.10pc.ig.			
10.	abo	ut seeking bankrupto	y or preparii	ng a bankruptcy	or anyone else acting on your b petition? edit counseling agencies for service			iyone you consuited
					Description and value of any transferred	property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm			Attorney's Fee - 350.00		11/7/2016	\$350.00
		Person Who Was Pai 11101 S. Western Ave						
		Number Street	indo					
		Chicago III	linois	60643				
				Zip Code				
		Email or website add	ress					
		Person Who Made the	e Payment, if I	Not You				
		Person Who Was Pai	d					
		Number Street						
		City S	state	Zip Code				
		Email or website add	ress					
		Person Who Made the	e Payment, if N	Not You				

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Deb	tor 1	Veronica		White	Case number (if known)	
		First Name	Middle Name	Last Name		
17.	help	hin 1 year before you filed by you deal with your credit not include any payment or tr No Yes. Fill in the details.	ors or to make payment	s to your creditors?	our behalf pay or transfer any prope	erty to anyone who promised to
	ш	res. I ili ili tre detalis.				
				Description and value of transferred	any property Date paymen transfer made	
		Person Who Was Paid				
		Number Street				
		City State	Zip Code			
		City State	Zip Code			
		ude both outright transfers an sfers that you have already lis No Yes. Fill in the details.			a security interest or mortgage on your	
				Description and value of property transferred	f any Describe any property payments received or in exchange	
		Person Who Received Tra	nsfer			
		Number Street				
		City State Person's relationship to yo	Zip Code u			
		Person Who Received Tra	nsfer			
		Number Street				
		City State Person's relationship to yo	Zip Code u			
19.		hin 10 years before you fil ese are often called asset-pro		ou transfer any property to	a self-settled trust or similar device	of which you are a beneficiary?
	V	No Yes. Fill in the details.				
	Ц	res. Fili III trie details.		Description and value	of the property transferred	Date transfer was made
		Name of trust				

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Debto	or 1	Veronica First Name Middle Name	White Last Name	Case number (if known)	
Part 8	₹.	List Certain Financial Accounts, Inst		ves and Storage Units	
20.	With mov	nin 1 year before you filed for bankruptcy, wer red, or transferred?	e any financial accounts or instr	uments held in your name, or for your benefit, o	
	_	No Yes. Fill in the details.			Leaded
			Last 4 digits of account number	Type of account or instrument account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	XXXX-	Checking Savings	
		Number Street		Money market Brokerage Other	
		City State Zip Code			
		Person Who Was Paid	XXXX-	Checking Savings	
		Number Street		Money market Brokerage	
				Other	
		City State Zip Code			
		you now have, or did you have within 1 year beer valuables? No Yes. Fill in the details.	efore you filed for bankruptcy, an	ny safe deposit box or other depository for secu	rities, cash, or
'			Who else had access to it?	Describe the contents	Do you still have it?
		Name of Financial Institution	Name		☐ No ☐ Yes
		Number Street	Number Street		_
			City State Zip	Code	
		City State Zip Code			
22 .		e you stored property in a storage unit or plac	e other than your home within 1	year before you filed for bankruptcy?	
		Yes. Fill in the details.			
			Who else had access to it?	Describe the contents	Do you still have it?
		Name of Storage Facility	Name		☐ No ☐ Yes
		Number Street	Number Street		
		City State 7's Code	City State Zip	Code	
		City State Zip Code			

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	First Name Middle Name	Last Name						
ırt 9:	Identify Property You Hold or Con	trol for Someone Else						
, ,		anna alaa ayyaa2 laalyda any maananti yay hayyayyad firam, aya ataying fay ay bal	d in turnet for					
	you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for neone.							
_	7 N.							
Ľ	No							
L	Yes. Fill in the details.	Where is the appropriate O	Value					
		Where is the property? Describe the contents	Value					
	Owner's Name	Number Street						
	Number Street							
		City State Zip Code						
	City State Zip Code	-						
	Cive Details About Environments	al Information						
art 1(Give Details About Environmenta	n iniorniation						
or the	purpose of Part 10, the following definitions app	ly:						
	Environmental law means any federal, state, or	local statute or regulation concerning pollution, contamination, releases of						
		rial into the air, land, soil, surface water, groundwater, or other medium,						
	including statutes or regulations controlling the	cleanup of these substances, wastes, or material.						
•	Site means any location, facility, or property as d	efined under any environmental law, whether you now own, operate, or utilize it						
	or used to own, operate, or utilize it, including d	isposal sites.						
	Hazardous material means anything an environr	mental law defines as a hazardous waste, hazardous substance,						
	toxic cubetance hazardous material pollutant of							
	toxic substance, nazardous materiai, polititarii, t	contaminant, or similar term.						
epor								
Repor	all notices, releases, and proceedings that you k							
	all notices, releases, and proceedings that you k		v?					
	all notices, releases, and proceedings that you k	know about, regardless of when they occurred.	v?					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have all notices.	know about, regardless of when they occurred.	v?					
	all notices, releases, and proceedings that you k	know about, regardless of when they occurred. You may be liable or potentially liable under or in violation of an environmental law						
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have all notices.	know about, regardless of when they occurred.						
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have all notices.	know about, regardless of when they occurred. You may be liable or potentially liable under or in violation of an environmental law	Date of					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have all notices.	know about, regardless of when they occurred. You may be liable or potentially liable under or in violation of an environmental law	Date of					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you not not notified you that you not not not not not not not not not not	crow about, regardless of when they occurred. Tou may be liable or potentially liable under or in violation of an environmental law Governmental unit Governmental unit Governmental unit	Date of					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you not notified you that you not not not not not not not not not not	crow about, regardless of when they occurred. Tou may be liable or potentially liable under or in violation of an environmental law Governmental unit Environmental law, if you know it	Date of					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you not not notified you that you not not not not not not not not not not	Governmental unit Governmental unit Governmental unit Number Street	Date of					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Governmental unit Number Street	Date of					
	all notices, releases, and proceedings that you keep as any governmental unit notified you that you not not notified you that you not not not not not not not not not not	Governmental unit Governmental unit Governmental unit Number Street	Date of					
. н <u>Б</u>	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code	Governmental unit Governmental unit Governmental unit City State Zip Code	Date of					
. н <u>Б</u>	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of arms.	Governmental unit Governmental unit Governmental unit City State Zip Code	Date of					
. н <u>С</u>	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art	Governmental unit Governmental unit Governmental unit City State Zip Code	Date of					
. н <u>С</u>	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of are	Governmental unit Governmental unit Governmental unit City State Zip Code Type release of hazardous material?	Date of notice					
і. н С	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art	Governmental unit Governmental unit Governmental unit City State Zip Code	Date of notice					
4. H	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art	Governmental unit Governmental unit Governmental unit City State Zip Code Type release of hazardous material?	Date of notice					
4. н С	all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art	Governmental unit Governmental unit Governmental unit City State Zip Code Type release of hazardous material?	Date of notice					
4. н С	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Governmental unit City State Zip Code Governmental unit Governmental unit Environmental law, if you know it	Date of notice					
4. н С	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art No Yes. Fill in the details.	Governmental unit Governmental unit Governmental unit City State Zip Code Ty release of hazardous material? Covernmental unit Environmental law, if you know it	Date of notice					
і. н С	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art No Yes. Fill in the details. Name of site	Governmental unit Governmental unit City State Zip Code City State Zip Code Governmental unit Governmental unit Covernmental unit City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State State Sip Code City Sip Code City State Sip Code City Sip Code C	Date of notice					
і. н С	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Governmental unit City State Zip Code Governmental unit Governmental unit Environmental law, if you know it	Date of notice					
. н <u>Б</u>	all notices, releases, and proceedings that you keep as any governmental unit notified you that yeep No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of art No Yes. Fill in the details. Name of site	Governmental unit Governmental unit City State Zip Code City State Zip Code Governmental unit Governmental unit Covernmental unit City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State State Sip Code City Sip Code City State Sip Code City Sip Code C	Date of notice					

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Deb	otor 1	Veronica			White	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	/ in any judici	al or administra	ative proceeding under	any environmenta	al law? Include settlements and orders	s.
	✓	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
					- ,			case
		Case title						Dan dia s
					Court Name			Pending
		-			ocur rumo			On appeal
		Case number			Number Street	_		Concluded
								Concluded
					City State	Zip Code		
Dari	t 11:	Give Details A	hout Your	Rusiness or	Connections to Ar	v Rusiness		
Ган		Give Details A	bout four	Busiliess Of	Connections to Ai	ly Dusiliess		
27.	With	nin 4 years before	you filed for I	bankruptcy, did	you own a business or	have any of the fo	ollowing connections to any business	?
		_	-		•	•	-	
				-	profession, or other activit		r part-time	
			-	y company (LLC)	or limited liability partner	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or manag	jing executive of	a corporation			
		An owner of at	t least 5% of th	e voting or equity	securities of a corporation	on		
		No. None of the abo	ove applies Go	to Part 12				
	Ħ				s below for each business	•		
	ш	ros. Oriook all triat (apply above al				Employer Identification n	umbar Da nat
					Describe the natu	are of the busines	Employer Identification n include Social Security nu	
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe	Pr	
		City	State	Zip Code			From To	
		•		·				
					Describe the net	of the business	Employer Identification n	umbar Da nat
					Describe the natu	are of the busines	Employer Identification n include Social Security nu	
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe	Pr	
		City	State	Zip Code			From To	
		•		·				
					Describe the mate	me of the breekers	Employee Identification	umbar De set
					Describe the natu	ire of the busines	Employer Identification n include Social Security nu	
								aniber of fills.
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
		2			Name of account	ant or bookkeepe	er	
		City	State	Zip Code	_		From To	
		July	Cidio	Zip Ooue				

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Deb	tor 1	Veronica		White	Case number (if known)
		First Name	Middle Name	Last Name	<u> </u>
28.	crec	hin 2 years before you filed for ditors, or other parties. No Yes. Fill in the details below.	bankruptcy, did you ç	give a financial statement to	anyone about your business? Include all financial institutions,
				Date issued	
		Name		MM/DD/YYYY	
		Number Street			
		City State	Zip Code		
Part	12:	Sign Below			
1	true a	and correct. I understand that	making a false statem	ent, concealing property, or	and I declare under penalty of perjury that the answers are obtaining money or property by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		X (2/)/2002 (20) (A/)	· -	×	In Consider Million
		/s/ Veronica White Signature of Debtor			/s/ Cozing White Signature of Debtor 2
		Signature of Debtor	1		Signature of Debiol 2
		Date 11/8/2016			Date 11/8/2016
ı	Did y	ou attach additional pages to	Your Statement of Fin	ancial Affairs for Individual	s Filing for Bankruptcy (Official Form 107)?
	Ξ.	vo Ves			
ı	Did y	ou pay or agree to pay someo	ne who is not an attori	ney to help you fill out bank	ruptcy forms?
ı	, 	No			
i		res. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Veronica White ; Cozing White	Case No.	
_	Debtor		(If known)
		Chapter	Chapter 13
	DISCLOSURE OF COMPEN	ISATION OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P that compensation paid to me within one year bef services rendered or to be rendered on behalf of is as follows:	ore the filing of the petition in bankruptcy, or a	greed to be paid to me, for
	For legal services, I have agreed to accept		\$4,000.00
	Prior to the filing of this statement I have receive	d	\$350.00
	Balance Due		\$3,650.00
2	The source of the compensation paid to me was:		
	<u> </u>	ther (specify)	
	2 200001	mer (epochy)	
3.	The source of the compensation paid to me is:		
	Debtor O	ther (specify)	
4.	I have not agreed to share the above-disclose members and associates of my law firm.	ed compensation with any other person unless	they are
		ompensation with a other person or persons whoy of the agreement, together with a list of the ached.	
5.	In return for the above-disclosed fee, I have agre a. Analysis of the debtor's financial situation, bankruptcy;	ed to render legal service for all aspects of the and rendering advice to the debtor in determin	
	b. Preparation and filing of any petition, sche	dules, statements of affairs and plan which ma	ay be required;
	c. Representation of the debtor at the meetin	g of creditors and confirmation hearing, and ar	ny adjourned hearings thereof;
	d. Representation of the debtor in adversary	proceedings and other contested bankruptcy r	natters:
6	By agreement with the debtor(s), the above-disclo		
0.	by agreement with the debtor(3), the above-discit	sed fee does not include the following service	3.
		CERTIFICATION	
	I certify that the foregoing is a complete statement ne debtor(s) in this bankruptcy proceedings.	of any agreement or arrangement for paymen	at to me for representation
	11/8/2016	/s/ Alex Nohr	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re: _	White, Veronica ; White, Cozing	Case No	
	Debtor(s)	Chapter.	Chantor12
		Спаріег	Chapter13
	VERIFICATION	OF CREDITOR MAT	ΓRIX
	The above named Debtors hereby verify that the att	ached list of creditors is tru	e and correct to the best of their knowledge.
Date:	11/8/2016	/s/ White, Veror	nica
		White, Veronica	
		Signature of De	btor
		/s/ White, Cozir	ng
		White, Cozing Signature of Jo	int Debtor

SAFCO 6700 N Andrews Ave # 5 Fort Lauderdale , FL 33309

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX 76161

GATEWYFINSOL 221 North La Salle Street # 1000 Chicago, IL 60601

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre, PA 18773

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DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre, PA 18773

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773 CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR , IL 61364

MSCB INC 1410 INDUSTRIAL PARK RD PARIS , TN 38242

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE , IL 60068

AFNI, INC. PO Box 3517 Bloomington , IL 61702

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO , IL 60622

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE , IL 60068

Bank of America POB 15026 WILMINGTON , DE 19801

AMERICAN COLLECTIONS E 205 S WHITING ST STE 500 ALEXANDRIA , VA 22304

Bank of America POB 15026 WILMINGTON , DE 19801

ENHANCED RECOVERY CORPORATION 8014 BAYBERRY RD JACKSONVILLE , FL 32256

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN 55164 CENTERPOINT ENERGY ENT PO BOX 1700 HOUSTON, TX 77251

AMER FST FIN 3515 N. Ridge Rd, Suite 200 Wichita , KS 67205

ENTERGY GSU PO BOX 6008 NEW ORLEANS , LA 70174

SNCHNFIN 1900 Hassell Rd Hoffman Est , IL 60169

SNCHNFIN 1900 Hassell Rd Hoffman Est , IL 60169

SNCHNFIN 1900 Hassell Rd Hoffman Est , IL 60169

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

NORTHWEST COLLECTORS 3601 ALGONQUIN RD STE 23 ROLLING MEADOWS, IL 60008

CCI 501 Greene Street # 302 Augusta , GA 30901

M3 Financial Services 10330 Roosevelt Rd #200 Westchester , IL 60154

Internal Revenue Service PO Box 7346 Philadelphia , PA 19101 Americash - Bankruptcy PO Box 184 Des Plaines , IL 60016

City of Chicago Department of Revenue 121 North LaSalle Street Chicago , IL 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago , IL 60604 B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Veronica White ; Cozing Wh	nite	Case	No.		
	Debtor			(11	f known)	
			Chapt	ter Ch	apter 13	
	DISCLOSURE OF C	COMPENSATION	ON OF ATTORI	NEY FOR DE	BTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one y rendered or to be rendered on behalf of	ear before the filing of th	ie petition in bankruptcy, o	r agreed to be paid to	me, for services	
	For legal services, I have agreed to acc	ept			\$4,000.00	
	Prior to the filing of this statement I ha	ave received			\$350.00	
	Balance Due				\$3,650.00	
2.	The source of the compensation paid to	to me was:				
	✓ Debtor	Other (specif	y)			
3.	The source of the compensation paid t	to me is:				
	Debtor	Other (specif	y)			
4.	I have not agreed to share the abormembers and associates of my law	ve-disclosed compensat v firm.	ion with any other person ι	unless they are		
	I have agreed to share the above-or members or associates of my law t the people sharing in the compens	firm. A copy of the agree	with a other person or personent, together with a list of	ons who are not f the names of		
5.	In return for the above-disclosed fee, I a. Analysis of the debtor's financi bankruptcy;	have agreed to render le al situation, and renderir	gal service for all aspects of ng advice to the debtor in d	f the bankruptcy case etermining whether to	e, including: o file a petition in	
	b. Preparation and filing of any pe	etition, schedules, statem	ents of affairs and plan wh	ich may be required;		
	c. Representation of the debtor at	ebtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;				
	d. Representation of the debtor in	adversary proceedings a	and other contested bankru	ptcy matters;		
6.	By agreement with the debtor(s), the ab	oove-disclosed fee does	not include the following s	ervices:		
		CERTIFI	CATION			
debto	certify that the foregoing is a complete or(s) in this bankruptcy proceedings.	statement of any agreem	ent or arrangement for pay	ment to me for repres	sentation of the	
	11/7/2016		/s/ Chad Mizell	e		
	Date		Signature of Attorr	iey		
	_		Semrad Law Firm	า		
			Name of law firm	1		



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

VW

CW

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$402.00

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- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$92.00 for expenses, leaving a balance due of \$4,052.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 11/7/2016	
Signed:	
/s/ Veronica White // Monica Shirt	J.
/s/ Cozing White Corpy on him	/s/ Chad Mizelle
Debtor(s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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Debtor 1 Veronica First Name	Middle Name	White	Case number (if known)	
	uestions for Reporting Purpose	Last Name		
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individua ☐ No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily money for a business or ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you	y consumer debts? Coal primarily for a personal al, family, or household iness debts are debts th the operation of the bu	d purpose." nat you incurred to obtain siness or investment.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that t		after any exempt property distribute to unsecured cr	y is excluded and administrative reditors?
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5,000 5,001-10,00 10,001-25,0	o <u>[</u>	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		Trease.	la-	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
^{20.} How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	Amund	Lan	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
	I have examined this petition, ar correct. If I have chosen to file under Ch of title 11, United States Code. under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance with I understand making a false stat connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1	papter 7, I am aware that I understand the relief and I did not pay or agreemed and read the notice the the chapter of title 11 tement, concealing propase can result in fines u	I may proceed, if eligible available under each charton pay someone who is required by 11 U.S.C. (1, United States Code, perty, or obtaining moniters)	ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed a not an attorney to help me fill § 342(b). specified in this petition. ey or property by fraud in isonment for up to 20 years, or
Max Nova I Company and the Benefit of the Company and the Comp	Signature of Debtor Executed on 11/7/2016 MM / DD	/ YYYY	Signature of Debtor Executed on	11/7/2016 MM / DD / YYYY

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Debtor 1	Veronica First Name	FA:-LIL Al-	White
Debtor 2	Cozing	Middle Name	Last Name White
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
Case number			(State)

Check if this is an amended filing

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pari	1: Sign Below		
	Did you pay or agree to pay someone who is NOT an attorney t	o help you fill out bankruptcy forms?	
	✓ No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
	Under society of position I declare that I have used the survey		
	Under penalty of perjury, I declare that I have read the summar that they are true and correct.	y and schedules filed with this declaration and	
×	/s/ Veronica White / Veronica White	x /s/ Cozing White Cajm white	
:	Signature of Debtor 1	Signature of Debtor 2	
ı	Date 11/7/2016 MM/DD/YYYY	Date 11/7/2016 MM/DD/YYYY	

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Debtor 1	Veronica		White	Case number (if known)	
	First Name	Middle Name	Last Name	The state of the s	
	thin 2 years before y editors, or other part		you give a financial state	ment to anyone about your business? Include all financial institutions	
<u> </u>	No Yes. Fill in the deta	ils below.			
-	•		Date issued		
	Name		MM/DD/YYYY		
	Number Street				
	City	State Zip Code			
	Sign Below	·			
	nkruptcy case can re			perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Cozing White	
	Signatur	e of Debtor 1/		Signature of Debtor 2	
	Date 11	/7/2016		Date 11/7/2016	
Did y	ou attach additional	I pages to Your Statement o	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?	
	No				
口,	Yes				
Did y	ou pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				
V	No				
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration. and Signature (Official Form 119).	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	White, Veronica ; White, Cozing Debtor(s)	Case No		
		Chapter.	Chapter13	
	VERIFICATION	OF CREDITOR MAT	RIX	
T knowledg	he above named Debtors hereby verify that the ale.	attached list of creditors is tr	ue and correct to the best of their	
Date:	11/7/2016	/s/ White, Veronic White, Veronica	Neropica 3/hite	
		Signature of Deb	<i>)</i>	
		Signature of Join	nt Debtor	

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				o	
Debt	tor 1 Veronica	Middle Name	White Last Name	Case number (if known)	
16		imily income that applies to		ne:	
	16a. Fill in the state in wh		Illnois		
		people in your household.	2	-	
		nily income for your state and s	<u></u>	-	\$65,659.00
	household	•	To fü	nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office.	400(000,000
17. How do the lines compare?					
17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determ under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).					
	U.S.C. § 1325(L	e than line 16c. On the top of p b)(3). Go to Part 3 and fill out current monthly income from i	Calculation of Dispo	neck box 2, Disposable income is determined under 11 pasable Income (Official Form 122C-2). On line 39 of that	
art	3: Calculate Your Co	ommitment Period Under	11 U.S.C. §1325(b)(4)	
18.	Copy your total average	monthly income from line 11			\$2,867.90
19.				is not filling with you, and you contend that calculating the four spouse's income, copy the amount from line 13.	
	19a. If the markal adjustm	nent does not apply, fill in 0 on	line 19a.		-\$0.00
	19b. Subtract line 19a f	rom line 18.			\$2,867.90
20.	Calculate your current i	monthly income for the year.	Follow these steps:		
	20a. Copy line 19b.				\$2,867.90
	Multiply by 12 (the n	number of months in a year).			x 12
	20b. The result is your cu	rrent monthly income for the ye	ar for this part of the f	form.	\$34,414.80
	20c. Copy the median far	mily income for your state and s	ize of household from	n line 16c.	\$65,659.00
21.	How do the lines compa	ire?			
•		line 20c. Unless otherwise orde s 3 years. Go to Part 4.	red by the court, on t	he top of page 1 of this form, check box 3, The	
		n or equal to line 20c. Unless ot period is 5 years. Go to Part 4.	herwise ordered by th	e court, on the top of page 1 of this form, check box	
art	4: Sign Below				
	By signing here, I dec	clare under penalty of perjury the	at the information on t	this statement and in any attachments is true and correct.	
	🗶 /s/ Veronica V	vnite Meronica XV.	hite:	1s/ Cozing White cozing white	
	Signature of Deb	tor 1		Signature of Debtor 2	

If you checked 17a, do NOT fill out or file Form 122C-2.

Date 11/7/2016

MM/DD/YYYY

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Date 11/7/2016

MM/DD/YYYY